

**Department of Social and Health Services**

**DP Code/Title: M2-CE Consumer Outcome System**

## Program Level - 030 Mental Health

Budget Period: 2003-05      Version: 11   2003-05 Agency Request Budget

### Recommendation Summary Text:

This decision package requests funding to support the ongoing operation of the Mental Health Division (MHD) consumer outcome system. This system was recommended by the 2000 Joint Legislative Audit and Review Committee (JLARC) audit of the mental health system, and funded for start up by the 2001 Legislative Session.

### Fiscal Detail:

### Operating Expenditures

<u>Operating Expenditures</u>		<u>FY 1</u>	<u>FY 2</u>	<u>Total</u>
<b>Program 030</b>				
001-1	General Fund - Basic Account-State	125,000	125,000	250,000
001-C	General Fund - Basic Account-DSHS Medicaid Federa	125,000	125,000	250,000
<b>Total Cost</b>		<b>250,000</b>	<b>250,000</b>	<b>500,000</b>

## Staffing

### Package Description:

In 2000, JLARC's performance audit of the mental health system recommended development of a consumer outcome system to measure the results of services provided (JLARC report, recommendation #10). JLARC estimated start up costs of \$730,000- \$950,000, with ongoing costs for the system of \$250,000 annually. The 2001 Legislature provided start up funding. MHD engaged a vendor and implementation is proceeding. MHD is now seeking ongoing funding for the system. Funds are needed for instrument licensing fees; an 800 line for transmission of data and reports; continued vendor contracts for ongoing data collection, data maintenance, report generation and feedback to Mental Health Providers, Regional Support Networks (RSNs) and MHD; and integration of consumer outcome data with existing MHD data.

The consumer outcome system will provide MHD, RSNs, and providers with evidence of consumer improvement over the course of treatment and will allow MHD, RSNs, and providers to tailor services to those that produce the best consumer outcomes. It provides MHD with consumer outcome measures that will be used to monitor RSNs' performance and will improve mental health system quality and accountability by providing direct clinical feedback to mental health clinicians about the effectiveness of mental health treatment.

## **Narrative Justification and Impact Statement**

*How contributes to strategic plan:*

Funding for this decision package will allow MHD to continue its performance measurement system and quality improvement efforts, meeting MHD strategic goal #5.

### Performance Measure Detail

**Program: 030**

**Goal: 05C Ensure prudent fiscal management at all levels of public mental health system**

No measures submitted for package

## Incremental Changes

FY 1

FY 2

***Reason for change:***

With ongoing funding, operation of the consumer outcome system will continue, following implementation. JLARC

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predicted that savings from a decrease of process indicators would fund ongoing operational costs of the system. However, these savings will not be realized for several years following implementation, and may never be fully realized due to the impact of the new Balanced Budget Act requirements from the Centers for Medicare and Medicaid Services (CMS). Continued operation of this system will require continued funding.

***Impact on clients and services:***

Clients will benefit through improved quality and effectiveness of mental health services. Funding this decision package will provide MHD, RSNs, and providers with evidence of consumer improvement over the course of treatment, and will allow MHD, RSNs, and providers to tailor services to those that produce the best consumer outcomes possible. Best practices will begin to be identified and shared, and the overall quality and effectiveness of mental health services across the state will improve.

***Impact on other state programs:***

None

***Relationship to capital budget:***

None

***Required changes to existing RCW, WAC, contract, or plan:***

None

***Alternatives explored by agency:***

Building the system within MHD, without using an external vendor, was explored and rejected. It was determined that an external vendor was much less costly and more efficient. The external vendor is able to collect, store, and generate reports within one hour using phones, computers, or faxes. For MHD to build and maintain such a system would be much more costly and involve 3 to 5 FTEs solely dedicated to maintaining this system. With the existing personnel cuts, it would not be possible for MHD to maintain this system internally.

***Budget impacts in future biennia:***

Cost would carry forward in future biennia.

***Distinction between one-time and ongoing costs:***

This request is for ongoing cost of \$250,000/year.

***Effects of non-funding:***

If this budget decision is not funded, MHD will not be able to support the consumer outcome system beyond Fiscal Year 2003. DSHS will not be in compliance with the two bills passed by the 2001 Legislature requiring implementation of the JLARC recommendations (SB5583 and HB 1650). RSNs, providers, stakeholders, and client groups have been involved in development to this point, with expectations that the system will be implemented and available to provide outcome information to the mental health system. If ongoing funding is not provided, implementation will fail.

***Expenditure Calculations and Assumptions:***

Yearly costs:  
\$5,000 - Instrument licensing fees

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\$35,000 - Toll-free 1-800 phone line for data and report transmission

\$50,000 - For contractors to integrate consumer outcome data with existing MH data

\$160,000 - In vendor contracts for ongoing data collection, data maintenance, report generation and feedback to Mental Health Providers, RSNs, and MHD.

**Object Detail**

**Program 030 Objects**

	<b><u>FY 1</u></b>	<b><u>FY 2</u></b>	<b><u>Total</u></b>
C    Personal Service Contracts	210,000	210,000	420,000
E    Goods And Services	40,000	40,000	80,000
<b>Total Objects</b>	<b>250,000</b>	<b>250,000</b>	<b>500,000</b>

**DSHS Source Code Detail**

**Program 030**

**Fund 001-1, General Fund - Basic Account-State**

<b><u>Sources</u></b>	<b><u>Title</u></b>	<b><u>FY 1</u></b>	<b><u>FY 2</u></b>	<b><u>Total</u></b>
0011	General Fund State	125,000	125,000	250,000
<b>Total for Fund 001-1</b>		<b>125,000</b>	<b>125,000</b>	<b>250,000</b>

**Fund 001-C, General Fund - Basic Account-DSHS Medicaid Federa**

<b><u>Sources</u></b>	<b><u>Title</u></b>	<b><u>FY 1</u></b>	<b><u>FY 2</u></b>	<b><u>Total</u></b>
19UL	Title XIX Admin (50%)	125,000	125,000	250,000
<b>Total for Fund 001-C</b>		<b>125,000</b>	<b>125,000</b>	<b>250,000</b>
<b>Total Program 030</b>		<b>250,000</b>	<b>250,000</b>	<b>500,000</b>